Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO	_	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	David		
	your government-issued	First name	_	First name
	picture identification (for example, your driver's			
	license or passport).	Middle name	_	Middle name
	Bring your picture			
	identification to your	Frankel  Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
	meeting with the trustee.	Last hame and outlix (or., or., ii, iii)		Last Hame and Guinx (Gr., Gr., II, III)
2.	All other names you have used in the last 8 years			
	Include your married or			
	maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	xxx-xx-5757		
	(ITIN)			

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years  Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	5215 Cheltenham Blvd. Lynhurst, OH 44124  Number, Street, City, State & ZIP Code  Cuyahoga  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
<b>6</b> .	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	tor 1 David L. Frankel				Case number (if known)			
Part	Tell the Court About Y	our Bankruptcy (	ase					
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to me under	■ Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how y order. If you a pre-printe	rou may pay. Typically ir attorney is submitting d address.	, if you are paying the fee yog your payment on your beh	ourself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with			
			(For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy ))). Also, go to the top of page 1 and check the appropriate box.  17 111 112 113  114 115 115 116 117 117 117 117 117 118 119 119 119 119 119 119 119 119 119					
		l request the but is not retained that applies	nat my fee be waived quired to, waive your f to your family size and	(You may request this option ee, and may do so only if you do you are unable to pay the	our income is less than 150% of the official poverty line fee in installments). If you choose this option, you must fill			
					,			
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	Yes.		Whon	Coop number			
					<del></del>			
			-		<del></del>			
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debto			Relationship to you			
		Distric	t	When	Case number, if known			
		Debto			Relationship to you			
		Distric	t	When	Case number, if known			
11.	Do you rent your residence?	■ No. Go to	line 12.					
		☐ Yes. Has	our landlord obtained	an eviction judgment agains	st you?			
			No. Go to line 12.					
			Yes. Fill out <i>Initial</i> S this bankruptcy petit		Judgment Against You (Form 101A) and file it as part of			

)eb	tor 1 David L. Frankel			Case number (if known)
art	3: Report About Any Bu	sinesses	You Own as a Sole Propi	rietor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of b	pusiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	ny
	If you have more than one sole proprietorship, use a		Number, Street, City, S	State & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate	box to describe your business:
	·		☐ Health Care Bu	usiness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Re	eal Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as	s defined in 11 U.S.C. § 101(53A))
			☐ Commodity Bro	oker (as defined in 11 U.S.C. § 101(6))
			☐ None of the about	ove
If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most report a small business debtor, you must attach your most report a small business debtor, you must attach your most report a small business debtor, you are a small business debtor, you must attach your most report a small business debtor, you are a small business debtor, you must attach your most report and in 11 U.S.C. 1116(1)(B).				are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Ch	napter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapt Code.	ter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapt	ter 11 and I am a small business debtor according to the definition in the Bankruptcy Code
art	4: Report if You Own or	Have Any	y Hazardous Property or A	Any Property That Needs Immediate Attention
4.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed	?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs		Where is the property?	
	urgent repairs?			Number, Street, City, State & Zip Code

Debtor 1 David L. Frankel

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 David L. Frankel			Case nu	Imber (if known)			
Par	t 6: Answer These Questi	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.		sumer debts? Consumer debts are al, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an	,		
			☐ No. Go to line 16b.		defined in 11 U.S.C. § 101(8) as "incurred by an obtain business or investment.  broperty is excluded and administrative ured creditors?  25,001-50,000  50,001-100,000  More than100,000  More than100,000  \$500,000,001 - \$1 billion  \$1,000,000,001 - \$50 billion  More than \$50 billion  \$500,000,001 - \$10 billion  \$1,000,000,001 - \$10 billion  More than \$50 billion  \$10,000,000,001 - \$50 billion  \$10,000,000,001 - \$50 billion  \$10,000,000,001 - \$50 billion  \$10,000,000,001 - \$50 billion			
			Yes. Go to line 17.			nd administrative  0,000 0,000 100,000 1100,000 100,001 - \$10 billion 100,001 - \$50 billion 100,001 - \$50 billion 100,001 - \$50 billion 1000,001 - \$50 billion 1000,001 - \$50 billion 1000,001 - \$10 billion		
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	e that are not consumer debts or bu	siness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.		_		
	Do you estimate that after any exempt property is excluded and	■ Yes.		am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will		■ No			incurred to obtain investment.  xcluded and administrative s?  25,001-50,000 50,001-100,000 More than100,000  \$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion More than \$50 billion  \$500,000,001 - \$1 billion \$10,000,000,001 - \$10 billion  \$10		
	be available for distribution to unsecured creditors?		□ Yes					
18.	How many Creditors do you estimate that you	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000				
	owe?	☐ 100-19 ☐ 200-99		10,001-25,000				
19.	How much do you estimate your assets to	□ \$0 - \$5	0,000 1 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million				
	be worth?	<b>\$100,0</b>	01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$50 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$5	0,000 01 - \$100,000	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million		administrative  00 000 000,000  01 - \$1 billion 001 - \$10 billion 0,001 - \$50 billion 0,001 - \$50 billion 0,001 - \$50 billion 0,001 - \$50 billion 650 billion  ile and correct. 1,12, or 13 of title 11, der Chapter 7. me fill out this		
	to be?	<b>=</b> \$100,0	01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	\$10,000,000,001 - \$50 billion			
D	O'm Dalam	<b>—</b> \$0000,0	στ ψττιιιιστι 		·	_		
Par For	you Sign Below	I have exa	amined this petition, and I decla	re under penalty of perjury that the	information provided is true and correct.	_		
	•	If I have o	hosen to file under Chapter 7, I	am aware that I may proceed, if eli	gible, under Chapter 7, 11,12, or 13 of title 11,			
		If no attor	ney represents me and I did not	•	is not an attorney to help me fill out this			
		I request	relief in accordance with the cha	apter of title 11, United States Code	, specified in this petition.			
		bankrupto 1519, and	y case can result in fines up to 3571.		ney or property by fraud in connection with a p 20 years, or both. 18 U.S.C. §§ 152, 1341,			
		David L.	I L. Frankel Frankel of Debtor 1	Signature of D	ebtor 2			
		Executed	on March 5, 2018 MM / DD / YYYY	Executed on	MM / DD / YYYY			

Debtor 1	David L. Frankel	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Adam S. Baker	Date	March 5, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Adam S. Baker (0069000)		
Printed name		
Baker, Baker & Baker LLC		
Firm name		
55 Public Square		
Suite 1330		
Cleveland, OH 44113		
Number, Street, City, State & ZIP Code		
Contact phone <b>216-771-3966</b>	Email address	sbakerlaw@sbcglobal.net
(0069000) OH		
Bar number & State		

Fill	in this inform	ation to identify your c	ase:				
Deb	otor 1	David L. Frankel					
Det	otor 2	First Name	Middle Name	Last Name			
	use if, filing)	First Name	Middle Name	Last Name			
Unit	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT	OF OHIO			
Cas	se number						
(if kn	own)					Check if the	
						amended	Tiling
<b>○</b> t	ficial Fam	1000 · ···					
		m 106Sum	nd Liabilitias an	d Certain Statistical Informatio	n	12/1	-
				are filing together, both are equally responsib			
info	rmation. Fill o	ut all of your schedule	s first; then complete th	ne information on this form. If you are filing am to the box at the top of this page.			
Par		rize Your Assets	ew cammary and onco	the box at the top of this page.			
rai	Julilla	TIZE TOUT ASSETS					
						<b>our asset</b> /alue of wh	at you own
1.	Schedule A/I 1a. Copy line	<b>B: Property</b> (Official For 55, Total real estate, fro	m 106A/B) om Schedule A/B			\$	113,100.00
	1b. Copy line	62, Total personal prop	erty, from Schedule A/B			\$	15,942.50
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	129,042.50
Par	t 2: Summa	rize Your Liabilities					
						our liabili Amount you	
2.			ims Secured by Property n A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Part 1 of Schedule	D	\$	124,598.00
3.			Insecured Claims (Official (priority unsecured claim	l Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the	total claims from Part 2	(nonpriority unsecured c	laims) from line 6j of Schedule E/F		\$	26,421.68
				Your total liabilit	ies   \$_	•	151,019.68
Par	t 3: Summa	rize Your Income and	Expenses				
4.		our Income (Official Formbined monthly income	,	· I		\$	1,762.00
5.	Schedule J: `Copy your mo	Your Expenses (Official I	Form 106J) e 22c of Schedule J			\$	1,862.06
Dar	t 4: Answer	Those Questions for A	dministrative and Statio	ctical Basarda			

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
  - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
  - Yes
- 7. What kind of debt do you have?
  - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
  - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Best Case Bankruptcy

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,730.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this infor	mation to identify	your case and the	nis filin	g:			
Debtor 1	David L. Fra		Name	Last Name			
Debtor 2							
(Spouse, if filing)	First Name		Name	Last Name			
United States Ba	ankruptcy Court for	the: NORTHER	N DIST	RICT OF OHIO			
Case number _							Check if this is an
							amended filing
Official Fo	<u>rm 106A/E</u>	<u> </u>					
Schedul	e A/B: Pr	operty					12/15
				only once. If an asset fits in more than one			
				ed people are filing together, both are equally top of any additional pages, write your nam			
Part 1: Describe	Each Residence, Bu	uilding, Land, or Oth	ner Real	Estate You Own or Have an Interest In			
1. Do you own or h		sitable interest in an		nee huilding land or similar grangers			
_		uitable interest in ar	iy reside	nce, building, land, or similar property?			
☐ No. Go to Par	t 2.						
Yes. Where is	s the property?						
			140				
1.1 <b>5215 Chel</b>	Itenham Blvd.		Wha	: is the property? Check all that apply			
		scription	_	Single-family home  Duplex or multi-unit building	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:		
	Street address, if available, or other description		Condominium or cooperative		Creditors Who Have Claims Secured by Proper		
Lyndhurs	t OH	44124-0000		Manufactured or mobile home	Current value of th		urrent value of the
City	State	ZIP Code		Land Investment property	entire property? \$113,100	-	ortion you own? \$113,100.00
•				Timeshare			ownership interest
				Other	(such as fee simpl	e, tenancy	by the entireties, or
			Who	has an interest in the property? Check one Debtor 1 only	a life estate), if known a life estate e	JWII.	
Cuyahoga	1		_	Debtor 2 only			
County					☐ Check if this i	e commu	nity proporty
					(see instructions		iity property
				r information you wish to add about this iten	n, such as local		
				erty identification number:			
			PPI	l 713-16-039			
					-		
				your entries from Part 1, including an			\$113,100.00
pages you h	ave attached for	Part 1. Write that	numb	er here	=> [		φ113,100.00
Part 2: Describe	Your Vehicles						
				any vehicles, whether they are register Schedule G: Executory Contracts and Ur		any vehic	cles you own that
3. Cars, vans, tr	ucks, tractors, sp	oort utility vehicle	es, mot	orcycles			
■ No							
☐ Yes							

Official Form 106A/B Schedule A/B: Property page 1

De	ebtor 1	David L. Frankel Case number	(if known)
		raft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessors: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
ı	No		
[	☐ Yes		
5		e dollar value of the portion you own for all of your entries from Part 2, including any entries you have attached for Part 2. Write that number here	
Pa	rt 3: Des	scribe Your Personal and Household Items	
Do	o you ow	vn or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example No	old goods and furnishings les: Major appliances, furniture, linens, china, kitchenware	
	■ Yes.	Describe	
		Household Goods	\$4,000.00
7.	Electron Example	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanne including cell phones, cameras, media players, games	ers; music collections; electronic devices
	■ No		
	⊔ Yes.	Describe	
8.	Example	bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; so other collections, memorabilia, collectibles	stamp, coin, or baseball card collections;
	■ No □ Yes.	Describe	
9.	Example _	eent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, sk musical instruments	is; canoes and kayaks; carpentry tools;
	■ No □ Yes.	Describe	
10.	_ `	ms ples: Pistols, rifles, shotguns, ammunition, and related equipment	
	■ No □ Yes.	Describe	
11.	Clothes Examp	soles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	Yes.	Describe	
		Wearing Apparel	\$1,000.00
12.	Jewelry Examp	<b>y</b> oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch	es, gems, gold, silver
	□ No ■ Yes.	Describe	
			7 000000
		Misc. Jewelery	\$800.00

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Official Form 106A/B

Best Case Bankruptcy

page 2

Schedule A/B: Property

	David L. Frankel		Case number (if known)	
Examp	rm animals oles: Dogs, cats, birds, horses			
■ No □ Yes.	Describe			
14. Any ot	her personal and household iten	ns you did not already list, including any he	alth aids you did not list	
	Give specific information			
		ries from Part 3, including any entries for pa		\$5,800.00
Part 4: De	scribe Your Financial Assets			
Do you ow	vn or have any legal or equitable	interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	oles: Money you have in your waller	t, in your home, in a safe deposit box, and on h	nand when you file your petit	ion
			Cash	\$25.00
□ No		Institution name:		
■ Yes	17.1. <b>Check</b>	ring Fifth Third		\$400.00
■ Yes				\$400.00 \$5.50
18. <b>Bonds</b>	17.1. Check  17.2. Saving  , mutual funds, or publicly tradeoules: Bond funds, investment accounts.	gs Fifth Third  d stocks unts with brokerage firms, money market accord	unts	
18. <b>Bonds</b> Examp ■ No	17.1. Check  17.2. Saving  , mutual funds, or publicly tradeoules: Bond funds, investment accounts.	gs Fifth Third	unts	
18. <b>Bonds</b> <i>Examp</i> ■ No  □ Yes  19. <b>Non-pu</b>	17.1. Check  17.2. Saving  , mutual funds, or publicly tradeoules: Bond funds, investment account institution.  Institution	gs Fifth Third  d stocks unts with brokerage firms, money market accord		\$5.50
18. Bonds Examp ■ No □ Yes  19. Non-pt and jo □ No	17.1. Check  17.2. Saving  , mutual funds, or publicly tradeoples: Bond funds, investment account institution in the control of the control o	gs Fifth Third  d stocks unts with brokerage firms, money market account or issuer name: s in incorporated and unincorporated busin		\$5.50
18. Bonds Examp ■ No □ Yes  19. Non-pt and jo □ No	17.1. Check  17.2. Saving  , mutual funds, or publicly tradeo  ples: Bond funds, investment account institution  Institution  Jublicly traded stock and interests int venture  Give specific information about the	gs Fifth Third  d stocks unts with brokerage firms, money market account or issuer name: s in incorporated and unincorporated business	esses, including an intere	\$5.50
18. Bonds  Examp  No  Yes  19. Non-pu and jo  No  Yes.  20. Govern Negoti Non-no	17.1. Check  17.2. Saving  , mutual funds, or publicly tradectories: Bond funds, investment account institution.  Institution ublicly traded stock and interests int venture  Give specific information about the Name of enterment and corporate bonds and table instruments include personal of the saving sa	gs Fifth Third  d stocks unts with brokerage firms, money market according or issuer name: s in incorporated and unincorporated busines em ity: c LLC  other negotiable and non-negotiable instructhecks, cashiers' checks, promissory notes, and cannot transfer to someone by signing or delement	esses, including an interest of ownership:  100% %  ments and money orders.	\$5.50 st in an LLC, partnership,
18. Bonds  Examp  No  Yes  19. Non-pu and jo  No  Yes.  20. Govern Negoti Non-ne No Yes.  21. Retirer	17.1. Check  17.2. Saving  mutual funds, or publicly tradeoules: Bond funds, investment accounts  Institution  Institution  Ublicly traded stock and interests int venture  Give specific information about the Name of enterprise include personal depotiable instruments include personal degotiable instruments are those your Give specific information about the Issuer name ment or pension accounts	gs Fifth Third  d stocks unts with brokerage firms, money market according or issuer name: s in incorporated and unincorporated busines em ity: c LLC  other negotiable and non-negotiable instructhecks, cashiers' checks, promissory notes, and cannot transfer to someone by signing or delement	% of ownership:  100%  ments and money orders. ivering them.	\$5.50 st in an LLC, partnership,

18-11159-jps Doc 1 FILED 03/06/18 ENTERED 03/06/18 11:07:14 Page 12 of 51

Debto	or 1	David L. Fra	nkel			Case number (if known)	
-	Yes. L	ist each accoun	t separately. Type of accou	nt: Institu	ution name:		
			IRA	Ame	erican Funds		\$8,500.00
Y E	our sh		d deposits you ha		ay continue service or use from the service of the service or use from the ser		s, or others
				Institu	ution name or individual:		
_	<b>nnuiti</b> No	es (A contract fo	r a periodic payn	nent of money to you, eit	ther for life or for a number of	f years)	
	Yes	lss	suer name and de	escription.			
26			on IRA, in an acc 529A(b), and 529		LE program, or under a qua	alified state tuition progr	am.
		Ins	stitution name an	d description. Separately	y file the records of any interes	ests.11 U.S.C. § 521(c):	
	rusts, No	equitable or fu	ure interests in	property (other than a	nything listed in line 1), and	d rights or powers exerci	sable for your benefit
	Yes.	Give specific info	ormation about th	nem			
<i>E</i>	Exampi No	les: Internet dom			ellectual property alties and licensing agreeme	nts	
<b>=</b>	Exampi No	les: Building peri	and other general mits, exclusive liconomics and other general controls and other general controls and other general controls are controls and other general controls and other general controls are controls are controls are controls and other general controls are controlled and controls are controlled are controls are controls are controls are controls are controlled are controls are controlled are control	censes, cooperative asso	ociation holdings, liquor licen:	ses, professional licenses	
		property owed t					Current value of the
	o, o. p	roporty officer	o you.				portion you own? Do not deduct secured claims or exemptions.
	No	unds owed to you		em, including whether yo	ou already filed the returns ar	nd the tax years	
						_	
				2017		federal & state	\$1,212.00
E	Exampi No	support les: Past due or Give specific info		ny, spousal support, child	d support, maintenance, divo	rce settlement, property se	ettlement
<b>=</b>	Exampi No	benefits; unp	es, disability insu paid loans you m	rance payments, disabili ade to someone else	ity benefits, sick pay, vacation	n pay, workers' compensa	ation, Social Security
	Yes.	Give specific info	ormation				
Ε		s in insurance les: Health, disal		ance; health savings acc	count (HSA); credit, homeow	ner's, or renter's insurance	

Official Form 106A/B Schedule A/B: Property page 4

Debtor 1	David L. Frankel	Case number (if known)		
Yes. Name the insurance company of each policy and list its value. Company name:		Beneficiary:	Surrender or refund value:	
	Protective Life - term policy	Sherry/Gary Frankel	\$0.00	
If you somed	sterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurant one has died.  Give specific information	ce policy, or are currently entitled to red	eive property because	
Exam <sub>i</sub> ■ No	s against third parties, whether or not you have filed a lawsuit or reples: Accidents, employment disputes, insurance claims, or rights to subscribe each claim			
■ No	contingent and unliquidated claims of every nature, including cou	interclaims of the debtor and rights t	o set off claims	
■ No	nancial assets you did not already list  Give specific information			
	the dollar value of all of your entries from Part 4, including any en art 4. Write that number here		\$10,142.50	
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. List a	any real estate in Part 1.		
No. Go	own or have any legal or equitable interest in any business-related property? o to Part 6. Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Havou own or have an interest in farmland, list it in Part 1.	ve an Interest In.		
■ No.	u own or have any legal or equitable interest in any farm- or comm . Go to Part 7. s. Go to line 47.	nercial fishing-related property?		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not Lis	st Above		
Exam <sub>i</sub> ■ No	u have other property of any kind you did not already list?  ples: Season tickets, country club membership  Give specific information			
	the dollar value of all of your entries from Part 7. Write that number	er here	\$0.00	

Official Form 106A/B Schedule A/B: Property page 5

Deb	otor 1 David L. Frankel		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$113,100.00
56.	Part 2: Total vehicles, line 5	\$0.00		_
57.	Part 3: Total personal and household items, line 15	\$5,800.00		
58.	Part 4: Total financial assets, line 36	\$10,142.50		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$15,942.50	Copy personal property total	\$15,942.50
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$129,042.50

Official Form 106A/B Schedule A/B: Property page 6 Best Case Bankruptcy

CUYAHOGA COUNTY RECORDER PATRICK J. OMALLEY - 2 DEED 06/14/2007 03:20:49 PM 200706141392

General Warranty Deed

# KNOW ALL MEN BY THESE PRESENTS

That, RUTH R. LEFTON (Widowed & Not Remarried)

the Grantor, who claims title by or through the instrument recorded in Volume 15685, Page 545 of the County Recorder's Office, for the consideration of Ten Dollars (\$10.00) and other valuable consideration received to her full satisfaction of:

### DAVID L. FRANKEL (Unmarried)

the Grantee, whose tax mailing address is: C/O HUNTINGTON MTG. CO., 7575 HUNTINGTON PARK DR., COLUMBUS, OH 43235

has GIVEN, GRANTED, REMISED and RELEASED with GENERAL WARRANTY COVENANTS and does by these presents give, grant, remise, and release, with GENERAL WARRANTY COVENANTS, unto the said Grantee, his heirs, successors and assigns forever, the following described piece or parcel of land:

Situated in the City of Lyndhurst, County of Cuyahoga, and State of Ohio: And known as being Sublot No. 3 in the Cheltenham Harwich Subdivision of part of Original Euclid Township Lot Nos. 79 and 80 as shown by the recorded plat in Volume 142 of Maps, Page 10 of Cuyahoga County Records, and being 30 feet front on the Easterly curved side of Cheltenham Boulevard, 31.42 feet on the curved turnout extending between the Easterly curved side of Cheltenham Boulevard and the Northerly side of Longton Road, and extending back 149.08 feet on the Northerly line, 140.0 feet on the Southerly side, which is also the Northerly line of Longton Road, and having a rear line of 56.45 feet, as appears by said plat, be the same more or less, but subject to all legal highways.

PP# 713-16-039

Property Address: 5215 Cheltenham Boulevard, Lyndhurst Ohio 44124

And I, RUTH R. LEFTON, the said Grantor, do for myself and my heirs, executors and administrators, covenant with the said Grantee, his heirs and assigns, that at and until the unsealing of the presents, I am well seized of the above described premises, as a good and indefeasible estate in FEE SIMPLE, and have good right to bargain and sell the same in the manner and form as above written, and that the same is free from all encumbrances whatsoever except zoning ordinances, conditions, easements and restrictions of record, and taxes and assessments, both general and special, not yet due and payable.

Grantor will WARRANT AND DEFEND said premises, with the appurtenances thereunto belonging, to the said Grantee, his heirs and assigns, against all lawful claims and demands whatsoever except as stated herein.

HL Title Agency, LLC 5005 Rockside Rd Ste. 230 Independence, OH 44131

Fill in this inforn	nation to identify your	case:			
Debtor 1	David L. Frankel				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					Check if this is an
				;	amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check is	one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	current value of the portion you own	and the second s		Specific laws that allow exemption
5215 Cheltenham Blvd. Lyndhurst, OH 44124 Cuyahoga County	\$113,100.00	<b>=</b> _	\$136,925.00	Ohio Rev. Code Ann. § 2329.66(A)(1)
PPN 713-16-039 Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(1)
Household Goods Line from Schedule A/B: 6.1	\$4,000.00		\$11,625.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Line IIIIII Schedule PAB. 0.1			100% of fair market value, up to any applicable statutory limit	2329.00(A)(4)(a)
Wearing Apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
Enternoin deriedate AVD.			100% of fair market value, up to any applicable statutory limit	2020.00(/1)(4)(4)
Misc. Jewelery Line from Schedule A/B: 12.1	\$800.00		\$1,600.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
Life from Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	2020.00(7)(4)(8)
Cash Line from Schedule A/B: 16.1	\$25.00	<b>\$25.00</b>		Ohio Rev. Code Ann. § 2329.66(A)(3)
LINE HOTH SCHEDULE PAB. 10.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(3)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Best Case Bankruptcy

Debtor	1 Dav	id L. Frankel			Case number (if known)	
		ption of the property and line on //B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	_	r: Fifth Third Schedule A/B: 17.1	\$400.00	•	\$450.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
Δ,,	no nom c	Miledule A/D. IIII			100% of fair market value, up to any applicable statutory limit	2020.00(14)(0)
	., ,	rican Funds	\$8,500.00			Ohio Rev. Code Ann. §
Lii	ne from S	Schedule A/B: <b>21.1</b>			100% of fair market value, up to any applicable statutory limit	2329.66(A)(10)(c)
		state: 2017 Schedule A/B: 28.1	\$1,212.00		\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
LII	ne nom c	ochedule A/B. <b>20.1</b>			100% of fair market value, up to any applicable statutory limit	2323.00(A)(10)
		aiming a homestead exemption adjustment on 4/01/19 and every			led on or after the date of adjustme	ent.)
	-	Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?
		No	•		•	
		Yes				

				_	
Fill in this infor	mation to identify you	ur case:			
Debtor 1	David L. Franke	ıl			
	First Name	Middle Name Last Name			
Debtor 2		No. 10 August 1 Augus			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ba	inkruptcy Court for the	: NORTHERN DISTRICT OF OHIO			
O					
Case number (if known)				☐ Check	if this is an
				_	led filing
					-
Official Forn	n 106D				
Schedule	D: Creditors	Who Have Claims Secure	ed by Propert	V	12/15
			<u> </u>	•	
		f two married people are filing together, both are eq , number the entries, and attach it to this form. On t			
known).		,	o top or unity ununinonial p	agee,e year name a	(
1. Do any creditors	have claims secured by	your property?			
☐ No. Check	k this box and submit t	his form to the court with your other schedules.	You have nothing else	to report on this form.	
Yes Fill in	n all of the information	helow			
		bolow.			
	II Secured Claims		. Column A	Column B	Column C
		nore than one secured claim, list the creditor separately particular claim, list the other creditors in Part 2. As muc	/ for	Value of collateral	Unsecured
		er according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Bank of A	morica	Describe the property that secures the claim:	value of collateral. \$95,206.00	claim \$113 100 00	If any <b>\$0.00</b>
Creditor's Nam		5215 Cheltenham Blvd. Lyndhurst,	<u></u>	\$113,100.00	φυ.υυ
		OH 44124 Cuyahoga County			
4909 Sav	arese Circle	PPN 713-16-039			
FI 190801		As of the date you file, the claim is: Check all that			
	L 33634-2413	apply. □ Contingent			
Number, Street	t, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	he debtors and another	☐ Judgment lien from a lawsuit			
Check if this cl		Other (including a right to offset)			
community de	:Ut				
Date debt was inco	urred 2007	Last 4 digits of account number 8761			
	on Mortgage	Describe the property that secures the claim:	\$29,392.00	\$113,100.00	\$11,498.00
Creditor's Nam	е	5215 Cheltenham Blvd. Lyndhurst,			
PO Box 1	558	OH 44124 Cuyahoga County			
Dept. EA4		PPN 713-16-039 As of the date you file, the claim is: Check all that			
Columbu	·	apply.			
43216-15		Contingent			
Number, Street	t, City, State & Zip Code	Unliquidated			
Who owes the de	ebt? Check one	☐ Disputed  Nature of lien. Check all that apply.			
_		_	an una d		
Debtor 1 only		An agreement you made (such as mortgage or second car loan)	ecurea		
☐ Debtor 2 only ☐ Debtor 1 and De	ahtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	he debtors and another	☐ Statutory lief (such as tax lief), mechanics lief) ☐ Judgment lien from a lawsuit			
☐ Check if this cl		☐ Other (including a right to offset)			
community de					
Date debt was inci	urred 2007	Last 4 digits of account number 6139			

\_\_\_\_

Official Form 106D

page 1 of 2

Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1	David L. Frankel			Case number (if know)	
	First Name	Middle Name	Last Name		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$124,598.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$124,598.00

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

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Fill in this information to	identify your case:					
Debtor 1 David	I L. Frankel	ddl- Nows				
Debtor 2	ne Mic	ddle Name L	_ast Name			
(Spouse if, filing) First Na	ne Mic	ddle Name L	ast Name			
United States Bankruptcy	Court for the: NORTH	HERN DISTRICT OF OHIC	)			
Case number						
(if known)						heck if this is an mended filing
Official Form 106E	:/F					
Schedule E/F: Cr		ave Unsecured C	laims			12/15
	page. If you have no inform	nore space is needed, copy t mation to report in a Part, do Claims				
Do any creditors have pr						
No. Go to Part 2.	ority unsecured claims ag	gamst you:				
☐ Yes.  Part 2: List All of Your	NONPRIORITY Unsec	urad Claims				
3. Do any creditors have no						
_ `		this form to the court with your	other sche	dulos		
_	5 report in this part. Submit	this form to the court with your	other sche	uules.		
Yes.						
claim, list the creditor sepa	rately for each claim. For ea	e alphabetical order of the creach claim listed, identify what ty is in Part 3.If you have more that	ype of claim	it is. Do not list claims alrea	dy included in Part	1. If more than one
4.1 American Expre	ess	Last 4 digits of accoun	t number			\$1,179.00
Nonpriority Creditor's <b>P.O. Box 98153</b>		When was the debt inc	urrod?	1979		
El Paso, TX 799	-	When was the debt inc	urreur	1979		
Number Street City S	tate Zlp Code	As of the date you file,	the claim i	s: Check all that apply		
Who incurred the de	bt? Check one.	☐ Contingent				
Debtor 1 only		☐ Unliquidated				
Debtor 2 only		☐ Disputed				
☐ Debtor 1 and Deb	or 2 only	Type of NONPRIORITY	unsecured	l claim:		
☐ At least one of the		☐ Student loans				
☐ Check if this clai	m is for a community deb to offset?	Obligations arising or report as priority claims	ut of a sepa	ration agreement or divorce	that you did not	
■ No		☐ Debts to pension or p	profit-sharin	g plans, and other similar de	ebts	
☐ Yes		Other. Specify Cre	edit Card	d		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 6

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Debto	or 1 David L. Frankel		Case number (if know)	
4.2	Best Greening Services	Last 4 digits of account number	2666	\$157.00
	Nonpriority Creditor's Name c/o American Profit Recovery 34505 W. 12 Mile Rd. #333 Farmington, MI 48331	When was the debt incurred?	2017	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	■ Debtor 1 only	Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify lawn servi	ce	
4.3	Capital One	Last 4 digits of account number	0350	\$2,499.00
	Nonpriority Creditor's Name c/o Ted Traut, Esq.	When was the debt incurred?	2006-2017	
	Weltman, Weinberg & Reis	when was the dept incurred?	2000-2017	
	323 W. Lakeside Ave., #200			
	Cleveland, OH 44113			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecure	d claim:	
	☐ At least one of the debtors and another	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Care	<u> </u>	
4.4	Capital One	Last 4 digits of account number	3765	\$6.404.00
	Nonpriority Creditor's Name			. ,
	c/o WWR	When was the debt incurred?	2002	
	323 W. Lakeside Ave. #200 Cleveland, OH 44113			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	Пол		
	■ Debtor 1 only	Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed	l alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  Student loans		
	☐ Check if this claim is for a community debt	_		
	Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Care	i	
		- Other opening	<del></del>	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 6

Capital One (USA), N.A.	Last 4 digits of account number 4005	\$5,80
Nonpriority Creditor's Name	4003	<b>φ5,80</b>
c/o Client Services, Inc. 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047	When was the debt incurred? 2012	_
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
■ Debtor 1 only		
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
Citizens Bank	Last 4 digits of account number	\$2,16
Nonpriority Creditor's Name		Ψ2,10
1000 Lafayette Blvd. Bridgeport, CT 06604-4725	When was the debt incurred? 2007	_
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
_	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	_
Cleveland Clinic	Last 4 digits of account number 1129	\$31
Nonpriority Creditor's Name PO Box 89410	When was the debt incurred? 2018	·
Cleveland, OH 44101-6410		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
_	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Medical Services	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 6

Compnity Pank/Marathan	Last 4 digits of account number	¢coF o
Comenity Bank/Marathon Nonpriority Creditor's Name	Last 4 digits of account number	\$635.0
PO Baox 182789 Columbus, OH 43216-2789	When was the debt incurred? 1997-2017	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card	
First Federal Credit Control	Last 4 digits of account number	\$2,272.0
Nonpriority Creditor's Name 24700 Chagrin Blvd., Suite 205 Beachwood, OH 44122	When was the debt incurred? 2015	. ,
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	
UES Ahuja LLC	Last 4 digits of account number 1569	\$1,059.0
Nonpriority Creditor's Name 5700 Darrow Rd. #106	When was the debt incurred? 2018	
Hudson, OH 44236  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical Services	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 6

1 David	d L. Frankel		Case n	umber (if ki	now)	
	sity Hospital Medical Practic	Last 4 digits of account number	9443		_	\$1,806.
c/o Firs 24700 (	ty Creditor's Name st Fed Credit Control Chagrin Blvd. #205	When was the debt incurred?	2016	-2017		
	wood, OH 44122-5630 Street City State Zlp Code	As of the date you file, the claim i	s: Check	all that apply	y	
_	urred the debt? Check one.	☐ Contingent				
Debto	,	☐ Unliquidated				
☐ Debto	r 2 only	☐ Disputed				
☐ Debto	r 1 and Debtor 2 only	Type of NONPRIORITY unsecured	d claim:			
At leas	st one of the debtors and another	☐ Student loans				
	k if this claim is for a community debt im subject to offset?	Obligations arising out of a separeport as priority claims	ration agr	eement or d	livorce that you did not	
■ No		Debts to pension or profit-sharing	g plans, a	and other sim	nilar debts	
☐ Yes		■ Other. Specify Collection	for med	dical		
	sity Hospitals	Last 4 digits of account number	6048			\$2,123.0
20800 I	ty Creditor's Name Harvard Rd. wood, OH 44122	When was the debt incurred?	2018			
	Street City State Zlp Code	As of the date you file, the claim i	s: Check	all that apply	y	
Who incu	urred the debt? Check one.	☐ Contingent				
Debto	r 1 only	☐ Unliquidated				
☐ Debto	r 2 only	☐ Disputed				
☐ Debto	r 1 and Debtor 2 only	Type of NONPRIORITY unsecured	l claim·			
☐ At leas	st one of the debtors and another	☐ Student loans	. Oldiiii			
	k if this claim is for a community debt	☐ Obligations arising out of a separeport as priority claims	ration agr	eement or d	livorce that you did not	
■ No		Debts to pension or profit-sharin	g plans, a	and other sim	nilar debts	
☐ Yes		■ Other. Specify Medical Se	rvices			
List C	Others to Be Notified About a Debt	That You Already Listed				
g to collect than one o	nly if you have others to be notified about from you for a debt you owe to someon creditor for any of the debts that you listents 1 or 2, do not fill out or submit this parts.	e else, list the original creditor in Pa ed in Parts 1 or 2, list the additional o	rts 1 or 2	, then list th	e collection agency here	. Similarly, if you ha
Add t	he Amounts for Each Type of Unse	ecured Claim				
the amoun	nts of certain types of unsecured claims. aim.	This information is for statistical re	porting p	urposes on	ly. 28 U.S.C. §159. Add th	ne amounts for each
					Total Claim	
laims	6a. <b>Domestic support obligations</b>		6a.	\$	0.00	
Part 1	6b. Taxes and certain other debts yo		6b.	\$		

				l otal Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 26,421.68
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,421.68

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 6

Fill in this infor	rmation to identify your	case:			
Debtor 1	David L. Frankel				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
Case number					
(if known)					Check if this is an amended filing

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Ford Motot Credit
PO Box 542000
Omaha, NE 68154

State what the contract or lease is for
2016 Ford Explorer

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Fill in this	s information to identify your	case:			
Debtor 1	David L. Frankel First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRIC	Г ОГ ОНІО		
Case num	nber				☐ Check if this is an amended filing
	al Form 106H	obtoro			
Sched	dule H: Your Cod	eptors			12/15
1. Do	e and case number (if known			as a codebtor.	
■ No □ Ye					
	thin the last 8 years, have yoo na, California, Idaho, Louisiana				
	o. Go to line 3. es. Did your spouse, former spo	use, or legal equivalent liv	ve with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guara	ntor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Officia Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	None			Schedule D, line	
	Name			☐ Schedule E/F, I☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2	Name			☐ Schedule D, lind☐ Schedule E/F, I☐ Schedule G, lind☐	ine
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

						_				
Fill	in this information to identify yo	our case:								
Del	btor 1 David L.	Frankel			_					
	btor 2 buse, if filing)				_					
Uni	ited States Bankruptcy Court fo	r the: NORTHERN DISTRI	CT OF OHIO		_					
	se number nown)		-			☐ Ar		ed filing ent showin	ng postpetition	
0	fficial Form 106I					MI	M / DD/ \	/YYY		
S	chedule I: Your II	ncome				1411	IVI / DD/			12/15
spo atta Pa	plying correct information. If use. If you are separated and ch a separate sheet to this for the Describe Employment.	your spouse is not filing w rm. On the top of any addit	ith you, do not inclu	ıde infor	mat	ion about	your sp	ouse. If m	nore space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job attach a separate page with information about additional	Employment status	<ul><li>☐ Employed</li><li>■ Not employed</li></ul>				☐ Empl	oyed mployed		
	employers.	Occupation								
	Include part-time, seasonal, o self-employed work.	Employer's name								
	Occupation may include stud or homemaker, if it applies.	ent Employer's address								
		How long employed	there?				_			
Pai	Give Details About	Monthly Income								
	imate monthly income as of the use unless you are separated.	ne date you file this form. If	you have nothing to i	report for	any	line, write	s \$0 in the	e space. Ir	nclude your no	on-filing
,	ou or your non-filing spouse hav e space, attach a separate she		combine the information	on for all	emp	loyers for	that pers	on on the	lines below. If	you need
						For Deb	tor 1		btor 2 or ing spouse	
2.	List monthly gross wages, deductions). If not paid mont			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly o	vertime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. A	dd line 2 + line 3.		4.	\$		0.00	\$	N/A	

			Fo	or Debtor 1		ebtor 2		
	Copy line 4 here	4.	\$	0.00	\$	iiiig op	N/A	
5.	List all payroll deductions:		_					=
	5a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$		N/A	
	5b. Mandatory contributions for retirement plans	5b.	\$	0.00	\$		N/A	-
	5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$		N/A	-
	5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	-
	5e. Insurance	5e.	\$	0.00	\$		N/A	-
	5f. Domestic support obligations	5f.	\$	0.00	\$		N/A	-
	5g. Union dues	5g.	\$	0.00	\$		N/A	_
	5h. Other deductions. Specify:	5h.+	\$	0.00	+ \$		N/A	<del>-</del>
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$		N/A	-
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$		N/A	-
8.	List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a depend regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistate that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income	8c. 8d. 8e. ance	\$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ -	0.00 0.00 1,729.00 0.00 0.00	\$ \$ \$ \$		N/A N/A N/A N/A N/A	-
	8h. Other monthly income. Specify: Icon Music	8h.+ 	\$_	33.00	+ \$		N/A	-
9.	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,762.00	\$		N/A	<u>\</u>
10	Calculate monthly income. Add line 7 + line 9.	10. \$		1,762.00 + \$		N/A =	= \$	1,762.00
10.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.  Ψ-		1,702.00 + 4		IN/A	-]Ψ —	1,762.00
11.	State all other regular contributions to the expenses that you list in Scheolinclude contributions from an unmarried partner, members of your household, yother friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are specify:	our depen		•	•			0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Capplies</i>					12.	\$	1,762.00
13	Do you expect an increase or decrease within the year after you file this fo	orm?					Combir monthl	ned y income
13.	No.							

Yes. Explain:

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	David L. Frankel		neck if this is:  An amend	nd filing	
	ouse, if filing)		A supplem	ent shov	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO		MM / DD /	YYYY	
	nown)				
0	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people are filing together ormation. If more space is needed, attach another sheet to this form. On the top mber (if known). Answer every question.				
Par					
1.	Is this a joint case?  ■ No. Go to line 2.  □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Hol	usehold of [	Debtor 2.		
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Dependent's rel Debtor 1 or Deb		Depend age	lent's	Does dependent live with you?
	Do not state the dependents names.				□ No
	перепиенто нагнез.				☐ Yes ☐ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include expenses of people other than				☐ Yes
	yourself and your dependents?				
Est	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are using this penses as of a date after the bankruptcy is filed. If this is a supplemental Schedolicable date.				
the	lude expenses paid for with non-cash government assistance if you know value of such assistance and have included it on <i>Schedule I: Your Income</i> ficial Form 106I.)		Y	our expe	enses
4.	The rental or home ownership expenses for your residence. Include first mortgapyments and any rent for the ground or lot.	age 4.	\$		0.00
	If not included in line 4:				
	4a. Real estate taxes	4a.	\$		0.00
	4b. Property, homeowner's, or renter's insurance	4b.	\$		0.00
	4c. Home maintenance, repair, and upkeep expenses	4c.			100.00
_	4d. Homeowner's association or condominium dues	4d.	\$		0.00

Debtor 1	David L. Frankel	Case number (i	f known)
. Utili	ities:		
6a.	Electricity, heat, natural gas	6a. \$	240.00
6b.	Water, sewer, garbage collection	6b. \$	20.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	175.00
6d.	Other. Specify:	6d. \$	0.00
	d and housekeeping supplies	7. \$	300.00
		· .	
	dcare and children's education costs	· .	0.00
	thing, laundry, and dry cleaning	9. \$	75.00
	sonal care products and services	10. \$	50.00
	lical and dental expenses	11. \$	50.00
	nsportation. Include gas, maintenance, bus or train fare.	40 f	125.00
	not include car payments.	12. \$	
	ertainment, clubs, recreation, newspapers, magazines, and boo	-	0.00
. Cha	ritable contributions and religious donations	14. \$	0.00
. Insu	irance.		
Do r	not include insurance deducted from your pay or included in lines 4	or 20.	
15a.	Life insurance	15a. \$	20.00
15b.	. Health insurance	15b. \$	0.00
15c.	Vehicle insurance	15c. \$	158.00
15d.	Other insurance. Specify:	15d. \$	0.00
	es. Do not include taxes deducted from your pay or included in lines		0.00
Spe		16. \$	0.00
. Inst	allment or lease payments:		
17a.	Car payments for Vehicle 1	17a. \$	549.06
17b.	. Car payments for Vehicle 2	17b. \$	0.00
17c.	Other. Specify:	17c. \$	0.00
	Other. Specify:	17d. \$	0.00
	r payments of alimony, maintenance, and support that you did	•	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Officia		0.00
	er payments you make to support others who do not live with y		0.00
Spe		19.	0.00
	er real property expenses not included in lines 4 or 5 of this for		Income.
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	
		· ·	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	. Homeowner's association or condominium dues	20e. \$	0.00
. Oth	er: Specify:	21. +\$	0.00
Calc	culate your monthly expenses		
	Add lines 4 through 21.	•	1 962 06
	•	5 S	
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2 \$	
22c.	Add line 22a and 22b. The result is your monthly expenses.	\$	1,862.06
. Calo	culate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	1,762.00
	Copy your monthly expenses from line 22c above.	23b\$	1,862.06
_00.	- Supplies in the supplies of	200. Ψ	1,002.00
23c.	Subtract your monthly expenses from your monthly income.		
	The result is your monthly net income.	23c. \$	-100.06
For e	you expect an increase or decrease in your expenses within the example, do you expect to finish paying for your car loan within the year or do y diffication to the terms of your mortgage?		
	es. Explain here:		

Fill in this in	formation to identify your	case:			
Debtor 1	David L. Frankel				
	First Name	Middle Name	Las	t Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	l ac	t Name	
(Opodase II, IIIIIIg)	riistivame	Wilder Name	Las	trane	
United States	Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OHIO		
Case number					
(if known)					☐ Check if this is an
					amended filing
00000	4000				
	orm 106Dec				
Declara	ation About a	n Individua	l Debto	or's Schedules	12/15
If two married	d people are filing togethe	r, both are equally resp	onsible for s	supplying correct information.	
You must file	this form whenever you fi	le bankruptcy schedule	es or amende	ed schedules. Making a false s	statement, concealing property, or
			nkruptcy cas	e can result in fines up to \$250	0,000, or imprisonment for up to 20
years, or both	n. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
	Sign Below				
Did vou	pay or agree to pay some	one who is NOT an atto	ornev to help	you fill out bankruptcy forms?	?
	1.,		,	,	
■ No					
□ Yes	s. Name of person			Attach E	Bankruptcy Petition Preparer's Notice,
					tion, and Signature (Official Form 119)
Under pe	enalty of periury. I declare	that I have read the sur	mmarv and s	schedules filed with this declar	ration and
	are true and correct.		, , , , , ,		
Y /c/ F	David L. Frankel		х		
	id L. Frankel		^	Signature of Debtor 2	
	ature of Debtor 1			- 9	
Date	March 5, 2018			Date	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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Best Case Bankruptcy

Fil	l in this information	on to identify yo	our case:				
De		avid L. Frank					
Do	F btor 2	rst Name	Middle Name	Last Name			
1 -		rst Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO							
	se number						
(IT K	nown)					heck if this is an mended filing	
	ficial Form						
			Affairs for Individ			4/16	
info		space is neede	sible. If two married people d, attach a separate sheet to estion.				
			Marital Status and Where Yo	u Lived Before			
1.	What is your cu	What is your current marital status?					
	<ul><li>☐ Married</li><li>■ Not married</li></ul>						
2.	During the last 3	ring the last 3 years, have you lived anywhere other than where you live now?					
	_						
	<ul><li>■ No</li><li>Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul>						
	Debtor 1 Prior	Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there	
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)							
otat	_		, a.m., m., m., m., a.m., a.m., m., a.m., m., a.m., m., a.m., m., a.m.,		ilee, renae, rraeriirigieri aria r		
	■ No □ Yes Make s	ure you fill out S	chedule H: Your Codebtors (C	Official Form 106H)			
		aro you iiii out o	onodalo II. Todi Godobiolo (G	, , , , , , , , , , , , , , , , , , ,			
Pa	rt 2 Explain th	e Sources of Yo	our Income				
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.						
	□ No						
	Yes. Fill in the	ne details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$4,212.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

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Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

18-11159-jps Doc 1 FILED 03/06/18 ENTERED 03/06/18 11:07:14 Page 37 of 51

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

	include gifts and transfers that you have already  ■ No □ Yes. Fill in the details.						
	Person Who Received Transfer Address	•	property transferred		be any property or nts received or debts exchange	Date transfer was made	
	Person's relationship to you				ū		
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot ■ No □ Yes. Fill in the details.		ny property to a	self-settled	d trust or similar device	of which you are a	
	Name of trust	Description and	value of the prop	erty trans	ferred	Date Transfer was	
						made	
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Depos	it Boxes, and Sto	orage Unit	S		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or	•					
	houses, pension funds, cooperatives, associ No Yes. Fill in the details.				, s.i.a. 66 iii Saime, 6.66	in amone, pronorago	
		Last 4 digits of	Type of accou	nt or	Date account was	Last balance	
		account number instrument		closed, sold, moved, or transferred		before closing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?						
	No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?	
22.	Have you stored property in a storage unit or	r place other than you	r home within 1	year befor	e you filed for bankrup	tcy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe t	he contents	Do you still have it?	
Par	t 9: Identify Property You Hold or Control f	or Someone Else					
23.	Do you hold or control any property that son for someone.	neone else owns? Inc	lude any propert	y you borr	owed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe t	he property	Value	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 David L. Frankel Case number (if known)

For	the	purpose	of Part	10.	the	following	definitions	apply

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or
regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

24.	Has any governmental unit notified y	ou that you may be liable	e or potentially liable under o	or in violation of an environmental law?
-----	--------------------------------------	---------------------------	---------------------------------	--

Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.					
24.	. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	y release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	6. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>							
	Case Title	Court or agency	Nature of the case	Status of the				

Part 11: Give Details About Your Business or Connections to Any Business

	<b>-</b>
27. With	nin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
	☐ A partner in a partnership
	☐ An officer, director, or managing executive of a corporation
	☐ An owner of at least 5% of the voting or equity securities of a corporation
	No. None of the above applies. Go to Part 12.

Address (Number, Street, City,

State and ZIP Code)

Yes. Check all that apply	above and fill in t	he details below	for each business.

**Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Icon Music, LLC **Band/Music Entertainment** EIN: 82-1732698 5215 Cheltenham Blvd. Lyndhurst, OH 44124

Name

From-To 2017 to present self

Official Form 107

**Case Number** 

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

case

Debto	or 1 David L. Frankel	C	Case number (if known)
	nstitutions, creditors, or other parties.	otcy, did you give a financial statement to	anyone about your business? Include all financial
	No Yes. Fill in the details below.		
A	Name Address Number, Street, City, State and ZIP Code)	Date Issued	
Part 1	2: Sign Below		
are tru with a 18 U.S	e and correct. I understand that making		I declare under penalty of perjury that the answers obtaining money or property by fraud in connection years, or both.
Signa	ature of Debtor 1		
Date	March 5, 2018	Date	
Did yo ■ No □ Yes		nent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?
■ No		ot an attorney to help you fill out bankrup	
⊔ Yes	s. Name of Person Attach the Bank	ruptcy Petition Preparer's Notice, Declaratior	n, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

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				_
Fill in this inform	nation to identify your	case:		
Debtor 1	David L. Frankel			
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DIS	TRICT OF OHIO	
Case number				
(if known)				☐ Check if this is an
				amended filing
~ · · · -	400			
Official Fo				_
<u>Statemer</u>	nt of Intentio	n for Indiv	<u>/iduals Filing Under Chapt</u>	er 7 12/15
lf you are an indi	vidual filing under cha	ntor 7 you must fi	Ill out this form if:	
-	e claims secured by yo	-	in out this form in.	
	ed personal property a			
	ver is earlier, unless th		you file your bankruptcy petition or by the date the time for cause. You must also send copies to	
	ople are filing togethe	r in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
Be as complete a	and accurate as possib	le. If more space i	s needed, attach a separate sheet to this form. O	on the top of any additional pages.
	our name and case nur			top or any adminoral pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
1 For any credite	ors that you listed in Pa	art 1 of Schedule I	D: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D) fill in the
information be	elow.			
Identity the cre	editor and the property t	hat is collateral	What do you intend to do with the property th secures a debt?	at Did you claim the property as exempt on Schedule C?
Creditor's B	ank of America		Surrender the property.	□ No
name:			Retain the property and redeem it.	<b>.</b>
Description of	5215 Cheltenham	Rlvd	Retain the property and enter into a	■ Yes
property	Lyndhurst, OH 441		Reaffirmation Agreement.  Retain the property and [explain]:	
securing debt:	<b>Cuyahoga County</b>		La retain the property and [explain].	
	PPN 713-16-039			
	untington Mortgage		Surrender the property.	□ No
name:			Retain the property and redeem it.	■ Yes
Description of	5215 Cheltenham	Blvd.	☐ Retain the property and enter into a Reaffirmation Agreement.	<b>—</b> 163
property	Lyndhurst, OH 441	24	☐ Retain the property and [explain]:	
securing debt:	Cuyahoga County PPN 713-16-039			
D-110 111111		I Daniel Co		<del>_</del>
	our Unexpired Persona		in Schedule G: Executory Contracts and Unexp	ired Leases (Official Form 106G) fill
in the information	n below. Do not list rea	al estate leases. Ur	nexpired leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.
Describe your u	nexpired personal pro	perty leases		Will the lease be assumed?
, , , , , , , , ,		•		

Statement of Intention for Individuals Filing Under Chapter 7

page 1

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Best Case Bankruptcy

Del	otor 1 David L. F	-rankel	Case number (if ki	nown)
Les	ssor's name:	Ford Motot Credit		□ No
				■ Yes
	scription of leased operty:	2016 Ford Explorer		
Par	t 3: Sign Below			
		ıry, I declare that I have indicated m tt to an unexpired lease.	y intention about any property of my estate tha	at secures a debt and any personal
Χ	/s/ David L. Fra	inkel	x	
	David L. Frank	el	Signature of Debtor 2	
	Signature of Debte	or 1		
	Date March	5 2019	Date	

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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·						
FIII II	this information to identify your case:			eck one box only as o A-1Supp:	directed in this form and	d in Form
Debt	or 1 David L. Frankel			.A-13upp.		
Debt (Spou	or 2		•	1. There is no pres	sumption of abuse	
Unite	ed States Bankruptcy Court for the: Northern District of	of Ohio	[		to determine if a presu	•
					made under <i>Chapter 7</i> ficial Form 122A-2).	Means Test
(if kno	e number wn)		—		t does not apply now b	occupe of
`			'		y service but it could a	
				☐ Check if this is a	an amended filing	
Off	icial Form 122A - 1				3	
	apter 7 Statement of Your Cu	rrent Mo	nthly Inc	ome		12/15
separa numb milita Part		additional informates resumption of abu Presumption of Al	ation applies. On ise because you	the top of any addition do not have primarily c	al pages, write your nam onsumer debts or becau	ne and case se of qualifying
1.	What is your marital and filing status? Check one o	ınly.				
	Not married. Fill out Column A, lines 2-11.					
	☐ Married and your spouse is filing with you. Fill o			2-11.		
	Married and your spouse is NOT filing with you.	•	•			
	☐ Living in the same household and are not leg					
	☐ Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evadi	legally separate	d under nonban	kruptcy law that appl	ies or that you and you	
10 6 i	I in the average monthly income that you received from all stationary and the income for all stationary and the income for all 6 months, and divide the total by stationary are rental property, put the income from that property in one	onth period would l 6. Fill in the result.	be March 1 throug Do not include any	h August 31. If the amou income amount more tl	int of your monthly income nan once. For example, if I	varied during the
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime,	, and commissi	ons (before	\$ 3,697.00	\$	
3	all payroll deductions). <b>Alimony and maintenance payments.</b> Do not include	a navments from	a snouse if	φ <u>σ,σσ1.σσ</u>	Ψ	
0.	Column B is filled in.	, payments nom	a spouse ii	\$	\$	
4.	All amounts from any source which are regularly p of you or your dependents, including child support from an unmarried partner, members of your househol and roommates. Include regular contributions from a s filled in. Do not include payments you listed on line 3.	<ol> <li>Include regula</li> <li>your depende</li> </ol>	r contributions ents, parents,	\$0.00	\$	
5.	Net income from operating a business, profession,	•	.to. 1			
		\$ 0.00	otor 1			
	Gross receipts (before all deductions)	-\$ 0.00				
	Ordinary and necessary operating expenses		Copy here ->	\$ 0.00	\$	
6.	Net monthly income from a business, profession, or fa Net income from rental and other real property	ші ф	200, 11010		*	
0.	no. mosmo nom remai and other real property	Dek	otor 1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00				
	Net monthly income from rental or other real property	\$ 0.00	Copy here ->	\$ 0.00	\$	

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

0.00

\$

page 1

Best Case Bankruptcy

7. Interest, dividends, and royalties

Debtor 1

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 2

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# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	<b>7</b> :	Liquidation
\$	245	filing fee
;	\$75	administrative fee
+	\$15	trustee surcharge
\$	335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### United States Bankruptcy Court Northern District of Ohio

In re	David L. Frankel		Case N	0.	
		Debtor(s)	Chapte	<b>7</b>	
	DISCLOSURE OF COMPENS	ATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				
	For legal services, I have agreed to accept		\$	950.00	
	Prior to the filing of this statement I have received		\$	950.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compens	ation with any other perso	on unless they are m	embers and associate	tes of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				my law firm. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
1	a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stateme c. Representation of the debtor at the meeting of creditors a fil. [Other provisions as needed]  Negotiations with secured creditors to reduce reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house	ent of affairs and plan whi and confirmation hearing, uce to market value; e as needed; preparation	ch may be required; and any adjourned be exemption planni	nearings thereof;	and filing of
<b>6.</b>	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any disch any other adversary proceeding.			nces, relief from	stay actions or
	(	CERTIFICATION			
	certify that the foregoing is a complete statement of any agankruptcy proceeding.	greement or arrangement for	or payment to me fo	r representation of	the debtor(s) in
N	larch 5, 2018	/s/ Adam S. Bal	ker		
Date		Adam S. Baker	(0069000)		<del></del>
		Signature of Attor Baker, Baker &			
		55 Public Squa			
		Suite 1330			
		Cleveland, OH 4	44113 Fax: 216-771-412	1	
		sbakerlaw@sb		•	
		Name of law firm	- Sionaillet		

### United States Bankruptcy Court Northern District of Ohio

In re	David L. Frankel		Case No.	
		Debtor(s)	Chapter <b>7</b>	
	VERI	IFICATION OF CREDITOR N	<b>MATRIX</b>	
The abo	ove-named Debtor hereby verifies t	that the attached list of creditors is true and con	rect to the best of his/her knowledge.	
Date:	March 5, 2018	/s/ David L. Frankel		
		David L. Frankel		
		Signature of Debtor		

American Express P.O. Box 981537 El Paso, TX 79998-1537

Ford Motot Credit PO Box 542000 Omaha, NE 68154

Bank of America 4909 Savarese Circle Fl 19080147 Tampa, FL 33634-2413

Huntington Mortgage PO Box 1558 Dept. EA4W25 Columbus, OH 43216-1558

Best Greening Services UES Ahuja LLC c/o American Profit Recovery 5700 Darrow Rd. #106 34505 W. 12 Mile Rd. #333 Hudson, OH 44236 Farmington, MI 48331

Capital One c/o Ted Traut, Esq. Weltman, Weinberg & Reis 24700 Chagrin Blvd. #205 Beachwood, OH 44122-5630 Cleveland, OH 44113

University Hospital Medical Practic c/o First Fed Credit Control

Capital One c/o WWR 323 W. Lakeside Ave. #200 Cleveland, OH 44113

University Hospitals 20800 Harvard Rd. Beachwood, OH 44122

Capital One (USA), N.A. c/o Client Services, Inc. 3451 Harry S. Truman Blvd. Saint Charles, MO 63301-4047

Citizens Bank 1000 Lafayette Blvd. Bridgeport, CT 06604-4725

Cleveland Clinic PO Box 89410 Cleveland, OH 44101-6410

Comenity Bank/Marathon PO Baox 182789 Columbus, OH 43216-2789

First Federal Credit Control 24700 Chagrin Blvd., Suite 205 Beachwood, OH 44122